

**U.S. ENVIRONMENTAL PROTECTION AGENCY  
 MBE/WBE UTILIZATION UNDER FEDERAL GRANTS, COOPERATIVE  
 AGREEMENTS, AND INTERAGENCY AGREEMENTS**

**PART 1. (Reports are required even if no procurements are made during the reporting period.)**

<b>1A. FEDERAL FISCAL YEAR</b>  <u>2010</u>		<b>1B. REPORTING PERIOD</b> (Check ALL appropriate boxes)  <input type="checkbox"/> 1 <sup>st</sup> (Oct-Dec) <input type="checkbox"/> 2 <sup>nd</sup> (Jan-Mar) <input type="checkbox"/> 3 <sup>rd</sup> (Apr-Jun) <input type="checkbox"/> 4 <sup>th</sup> (Jul-Sep) <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Check if this is the last report for the project (Project completed).																				
<b>1C. REVISION OF A PRIOR REPORT?</b> Y or N Year: _____ Quarter: _____		<b>BRIEFLY DESCRIBE THE REVISIONS YOU ARE MAKING:</b>  _____																				
<b>2A. EPA FINANCIAL ASSISTANCE OFFICE ADDRESS</b> (ATTN: DBE Coordinator) U.S. EPA, Region 9 Grants Management Office, MTS-7 75 Hawthorne Street, San Francisco, CA 94105		<b>3A. RECIPIENT NAME AND ADDRESS</b> County of Hawaii 25 Aupuni Street Hilo, Hawaii 96720																				
<b>2B. EPA DBE COORDINATOR</b>  Name: Martha Villarreal  E-mail: <u>Villarreal.martha@epamail.epa.gov</u>	<b>2C. PHONE:</b>  415-972-3666  Fax: 415-947-3566	<b>3B. RECIPIENT REPORTING CONTACT:</b>  Name: Dora Beck  E-mail: <u>dbeck@co.hawaii.hi.us</u>	<b>3C. PHONE:</b>  808-961-8083  Fax: 808-961-8086																			
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<b>7. NAME OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> Dora Beck		<b>TITLE</b> Acting Director, Department of Environmental Management  <div style="text-align: right; font-weight: bold;">RECEIVED</div> <div style="text-align: right;">NOV 07 2011</div>																				
<b>8. SIGNATURE OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> <u>Dora Beck</u>		<b>DATE</b> <u>10/31/11</u>  <div style="text-align: right; font-weight: bold;">GMO, MTS-7</div>																				

EPA Financial Assistance Agreement Number: XP-96942401-2[illegible]

Type of product or service codes:

**1 = Construction**

**2 = Supplies**

### 3 = Services

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**1 – Construction**  
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**Note:** Refer to Terms and conditions of your Assistance Agreement to determine the frequency of reporting. Recipients are required to submit MBE/WBE reports to EPA beginning with the Federal fiscal year quarter the recipients receive the award, continuing until the project is completed.

EPA FORM 5700-52A - (Approval Expires 01/31/11)

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EPA Financial Assistance Agreement Number: XP-96042401-4

[illegible]

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<b>7. NAME OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> Lono Tyson	<b>TITLE</b> Director, Department of Environmental Management																		
<b>8. SIGNATURE OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> 	<b>DATE</b> 12/10/09																		

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U.S. EPA, Region 9

# **U.S. ENVIRONMENTAL PROTECTION AGENCY MBE/WBE UTILIZATION UNDER FEDERAL GRANTS, COOPERATIVE AGREEMENTS, AND INTERAGENCY AGREEMENTS**

## **PART 1. (Reports are required even if no procurements are made during the reporting period.)**

<b>1A. FEDERAL FISCAL YEAR</b>  200__2007__		<b>1B. REPORTING PERIOD (Check ALL appropriate boxes)</b>  <input type="checkbox"/> 1 <sup>st</sup> (Oct-Dec) <input type="checkbox"/> 2 <sup>nd</sup> (Jan-Mar) <input type="checkbox"/> 3 <sup>rd</sup> (Apr-Jun) <input type="checkbox"/> 4 <sup>th</sup> (Jul-Sep) <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Check if this is the last report for the project (Project completed).																				
<b>1C. REVISION OF A PRIOR REPORT? Y or N</b>  Year: _____ Quarter: _____		<b>BRIEFLY DESCRIBE THE REVISIONS YOU ARE MAKING:</b>																				
<b>2A. EPA FINANCIAL ASSISTANCE OFFICE ADDRESS</b> (ATTN: DBE Coordinator) U.S. EPA, Region 9 Grants Management Office, MTS-7 75 Hawthorne Street, San Francisco, CA 94105		<b>3A. RECIPIENT NAME AND ADDRESS</b> County of Hawaii 25 Aupuni Street Hilo, Hawaii 96720																				
<b>2B. EPA DBE COORDINATOR</b>  Name: Martha Villarreal  E-mail: <a href="mailto:Villarreal.martha@epamail.epa.gov">Villarreal.martha@epamail.epa.gov</a>	<b>2C. PHONE:</b>  415-972-3666  Fax: 415-947-3566	<b>3B. RECIPIENT REPORTING CONTACT:</b>  Name: Lono Tyson  E-mail: <a href="mailto:ltyson@co.hawaii.hi.us">ltyson@co.hawaii.hi.us</a>	<b>3C. PHONE:</b>  808-961-8083  Fax: 808-961-8086																			
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U.S. EPA, Region 9

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EPA Financial Assistance Agreement Number: \_XP-96942401-1

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Type of product or service codes:

1 = Construction

## 2 = Supplies

3 = Services

4 = Equipment

**Note:** Refer to Terms and conditions of your Assistance Agreement to determine the frequency of reporting. Recipients are required to submit MBE/WBE reports to EPA beginning with the Federal fiscal year quarter the recipients receive the award, continuing until the project is completed.

EPA FORM 5700-52A - (Approval Expires 01/31/11)